

Residency Form – Changing IP to R License

This form is to be completed when a physician would like to submit a request to the Board to change the Institutional Practice Limited License to a Residency Training License. **This form along with the \$75.00 Non-Refundable fee and Step 3 transcript must be completed by the deadline date** in order to be presented to the following board meeting: *(Dates for 2007 will be set at the December meeting)*

Board Meeting Deadline Dates

August 11, 2006

November 10, 2006

Board Meeting Dates

September 13, 2006

December 14, 2006

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This portion of the form must be completed by your Program Director

I hereby confirm that _____ is in good standing in
(Applicant's Name)

his/her residency training program at _____.
(Residency Program and department)

I recommend the Board issue a Residency Training License for the above applicant to practice medicine in this institution and/or settings approved by this residency training program.

(Printed Name of Program Director)

(Telephone Number)

(Program Director Signature)

(Date)

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KBML Use Only:

___ \$75.00 Fee
___ Step 3 Transcript
___ Program Director Signature and Date